



INMATES REFERRED FOR
MENTAL HEALTH
SERVICES AT THE SUFFOLK
COUNTY CORRECTIONAL
FACILITIES
-A ONE DAY SNAPSHOT-

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**The Suffolk County
Criminal justice Coordinating Council**

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**Inmates Referred for
Mental Health Services
At the Suffolk County Correctional Facilities
-A One Day Snapshot-**

**A Study Conducted for the Suffolk County, NY
Criminal Justice Coordinating Council (CJCC)**

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This report is dedicated to the memory of Patricia Parry, LMSW, a Social Worker for the Suffolk County Department of Health Services. Pat was a fierce advocate for individuals with mental illness, especially those individuals incarcerated in jails and prisons. This report would not have been completed without Pat's hard work and commitment.

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FORWARD & EXECUTIVE SUMMARY

The epidemic of psychiatric disorders in the U.S. prison system represents a national public health crisis. Epidemiologic studies show that 15%–24% of U.S. inmates have a severe mental illness (Diamond, Wang, Holzer, Thomas & des Angles, 2001). The Bureau of Justice Statistics reports that half of inmates— over 1 million individuals—have at least one mental health condition (James & Glaze, 2006).

For over a decade, the Criminal Justice Coordinating Council (CJCC) has made understanding the needs of mentally ill offenders a priority, working to illuminate the intersection of mental illness and criminal justice within Suffolk County’s correctional facilities. As a result, the CJCC has published the following reports since 2000:

- March 2000 - *Assessing the Nature and Prevalence of the Mentally Ill in Suffolk County’s Criminal Justice System*
- May 2003 - *Mental Health and the Criminal Justice System in Suffolk County: A Progress Report*
- May 2005 - *Suffolk County Criminal Justice System Analysis & Advisory Recommendations*
- November 2007 - *Alternatives to Incarceration Programs for Adult Offenders in Suffolk County, NY*
- August 2008 - *Jail Population Study An Analysis of Inmate Characteristics for Suffolk County, N.Y.*

For the present study, a “one-day snapshot” of all 1,884 inmates who were incarcerated in Suffolk County correctional facilities on October 25, 2007 was obtained through a daily census database maintained by the Suffolk County Sheriff’s Office. This information was checked against data obtained from the jail’s Mental Health Unit. The following additional information was extracted from case files of the 378 inmates who had a mental health case opened during their current incarceration:

- mental health diagnosis
- substance-related diagnosis
- type of treatment provided to inmate (counseling, medication management or both)
- length of time on suicide watch
- any psychiatric hospitalization during incarceration
- type and number of medical conditions

SUMMARY OF MAJOR FINDINGS

- ❖ Of the 1,884 inmates in the Suffolk County Correctional Facilities on 10/25/2007:
 - 579 (31%) were referred to the Mental Health Unit
 - 378 (20%) had cases opened by the Mental Health Unit
 - 223 (15%) were taking medication for a mental health issue
- ❖ A majority (65%) of the inmates referred to the Mental Health Unit had their cases opened
- ❖ Inmates seen by the Mental Health Unit were significantly more likely to be:
 - Older than those in the general jail population
 - White/non-Hispanic
 - Born in New York State
 - Educated at higher levels than those in the general jail population
 - Non-gang affiliated
- ❖ Inmates seen by the Mental Health Unit were significantly more likely to have:
 - A greater number of previous incarcerations than the general jail population
 - Longer periods of incarceration for their current jail stay than those in the general jail population
- ❖ Females were more likely to be seen by the Unit than males.
- ❖ Nearly half of the inmates with open mental health cases (46%) were diagnosed with *Depressive Disorder NOS* (Not Otherwise Specified).
- ❖ More than three-quarters of the inmates with open mental health cases (78%) had related co-occurring substance use disorder diagnoses.
- ❖ More than half of inmates receiving mental health treatment from the Mental Health Unit (55%) also had at least one medical condition (e.g. asthma, hepatitis, hypertension, seizure disorder, chronic pain).

INTRODUCTION

MENTAL HEALTH TREATMENT IN JAILS AND PRISONS

Since the early 1970s, prisons and jails have become one of the largest mental health institutions within the United States (Way, Sawyer, Lilly, Moffitt & Stapholz, 2008; Torrey, 1995). Epidemiologic studies have shown that an average of 15% - 24% of U.S. inmates have a severe mental illness (Baillargeon, Binswanger, Penn, Williams & Murray, 2009). In New York State, the number of prison inmates receiving mental health services has grown steadily, almost doubling from 4,500 in 1990 to 8,600 in 2008. There was a 12.7% increase in the total number of inmates receiving mental health services in State prison from 2004 to 2008 (Way, Sawyer, Lilly, Moffitt & Stapholz, 2008).

Large numbers of individuals with mental illness are now being treated in the criminal justice system, as opposed to being treated in the mental health system (Lamb, Weinberger, Marsh & Gross, 2007). It is important, therefore, to have more detailed information about inmate psychiatric and criminal histories and type of mental health treatment received while incarcerated.

THE PRESENT STUDY

The aim of this study was to provide an accurate assessment and current profile of the inmates in the Suffolk County Correctional Facilities on October 25, 2007. The one-day snapshot method for collecting data is commonly used by the Bureau of Justice Statistics and other research entities to conduct analyses of jail populations locally and nationally. The CJCC chose October 25, 2007 to be consistent with the same date as the last profile report that was conducted by the Suffolk County Criminal Justice Coordinating Council on that date in 2004. The targeted collection and summarization of characteristics of inmates such as those who are referred for mental health services allows the criminal justice system:

- *To adopt the most efficient management plans for the population of offenders*
- *To improve identification and response to mental health needs of inmates*

This study examined the demographic and criminal history characteristics of the inmates who were referred for mental health assessments and diagnosis at Suffolk County correctional facilities.

ABOUT THE SUFFOLK COUNTY JAIL MENTAL HEALTH UNIT

At the time of the study, clinic staffing included a clinic director, 1.5 full-time equivalent (FTE) psychiatrists, 1.80 FTE nurse practitioners, and 3.50 FTE social workers. Unit staff conducts mental health assessments on all inmates referred to the clinic. Inmates are referred to the clinic by correctional staff and may also self-refer. Collateral informants such as family members and previous mental health treatment providers may be interviewed with the consent of the inmate. Licensed psychologists are available to the clinical team for consultation on request.

At the time of the study, the Mental Health Unit was averaging three hundred inmate visits per week – approximately 10,000 visits per year. Inmates are typically seen for a minimum of 1-2 times per month for medication management and monitoring. The Mental Health Unit staff provides inmates with weekly supportive counseling and case management, when needed. Those inmates who are placed on suicide watch are seen by clinic staff daily and then weekly thereafter for monitoring.

METHODOLOGY

SUBJECT POPULATION

A “one-day snapshot” of all inmates who were incarcerated in a Suffolk County correctional facility on October 25, 2007 was obtained through a daily census database maintained by the Suffolk County Sheriff’s Office. This included inmates at a combination maximum/medium security facility in Riverhead, a minimum security facility in Yaphank, and a DWI Alternative facility on the grounds of the Yaphank jail site. On October 25, 2007, the jail census was 1,884.

DATA COLLECTION

The Sheriff’s Office database includes socio-demographic characteristics (gender, race/ethnicity, age, marital status, religion, educational level, employment status, and any gang affiliation) and criminal history characteristics (inmate status – pretrial or sentenced, offense

category for current arrest, court with authority over defendant/inmate, number of prior incarcerations, number of days in custody for the current stay, and amount of bail).

All inmate health information collected by the Suffolk County Jail Mental Health Unit is managed by the Suffolk County Department of Health. The Department of Health record consists of an initial psychosocial assessment and diagnosis sheet, clinic progress notes, medication record, a treatment plan and a detailed discharge summary (for closed cases). Inmate mental health treatment plans are completed on the third clinic visit and every three months thereafter. The mental health record may also include copies of treatment records received from other facilities or private practitioners. Closed case records are kept at the medical clinic for seven (7) years before being transferred to the County Archive Office.

Identifying information from each inmate who was incarcerated in a Suffolk County correctional facility on October 25, 2007 was checked against identifying information in the Department of Health records to determine if the inmate had a past or current history with the Jail Mental Health Unit. If there was a record of a current referral to the Jail Mental Health Unit, the outcome of the mental health screening was noted (case opened or reason for inmate being screened out). The following additional information was extracted from the paper case files of inmates who had a mental health case opened during their current incarceration:

- mental health diagnosis
- substance related diagnosis
- type of treatment provided to inmate (counseling, medication management or both)
- length of time on suicide watch
- any psychiatric hospitalization during incarceration
- type and number of medical conditions

DATA ANALYSIS

The data from the Suffolk County Sheriff's Office electronic database and the data that was extracted from the chart review of the Suffolk County Department of Health paper files were each entered into PASW Statistics 17.0.3 software and merged by inmate ID for further analyses.

For purposes of data cleaning and the description of population characteristics, univariate frequency distributions were first generated for each of the categorical variables (such as gender, education, place of birth) described above. Continuous variables (such as age, days in custody) were summarized using means and medians.¹ Chi-square Tests of Association were used to test the statistical significance of relationships between mental health referral status and all categorical inmate characteristics, and for relationships between major diagnostic categories and categorical inmate and treatment characteristics. One-way Analyses of Variance (ANOVAs) and Independent Samples Kruskal-Wallis Test were used to test the statistical significance of differences in means and medians, respectively for inmates with different referral status (e.g. never referred, referred, or mental health case opened) and with different diagnoses.

RESULTS

DESCRIPTION OF SUBJECT POPULATION

SOCIO-DEMOGRAPHIC CHARACTERISTICS

Inmates in the Suffolk County jails on October 25, 2007 were primarily male (90%), average age of 33, born in New York (72%), single (74%), Catholic (55%), had no known gang affiliation (81%), had a high school diploma (54%), and were employed full or part time (51%). Approximately one-third (35%) were white/non-Hispanic, and just over one-third (39%) were black/non-Hispanic. The other one-third was identified as either Hispanic-only with no race defined (21%) or the data was missing or labeled as other (5%). The data on inmate socio-demographic characteristics can be found in Table 3 in the Appendix.

CRIMINAL HISTORY CHARACTERISTICS

Inmates in the Suffolk County Jails on October 25, 2007 were primarily pre-trial (59%), and were charged with a range of crimes. The inmates had an average of 6.6 prior incarcerations, and more than half had been incarcerated for their current stay for at least 2

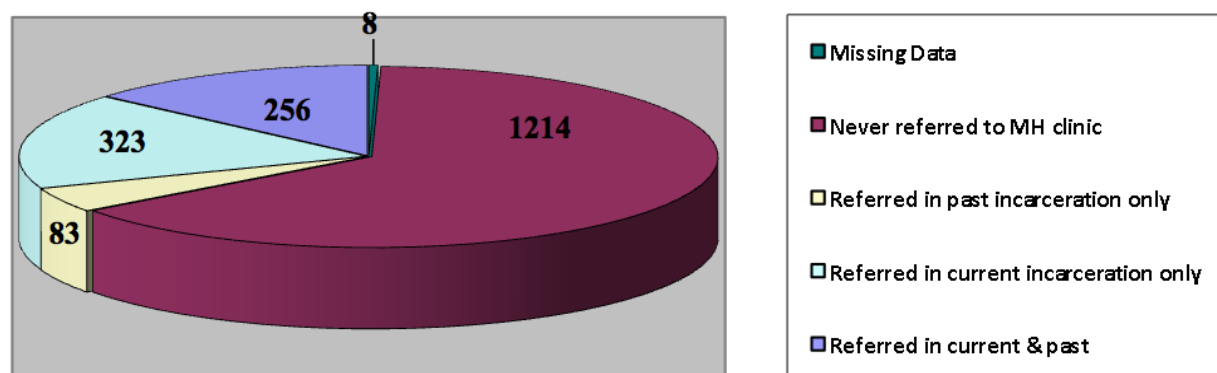
¹ The mean statistic is a measure of the arithmetic average of a set of continuous numbers and is particularly useful in situations in which the variable is normally distributed. The median is the numerical value in a list of ordinal numbers such that half the numbers are below that value and half are above that value. It is particularly useful when there are numerous "outliers" in the sample, or if the distribution is skewed.

months. The data on inmate criminal history characteristics can be found in Table 4 in the Appendix.

MENTAL HEALTH REFERRAL STATUS

Of the 1,884 inmates, a total of 661 (35%) inmates were referred to the Mental Health Unit during their current incarceration or during a past incarceration. 323 (17%) were referred to the clinic during their current incarceration only and 256 (14%) were referred to the clinic during their current incarceration, and during a past incarceration. 83 (4%) were referred to the Mental Health Unit during a past incarceration only, and 1214 (64%) were never referred to the Mental Health Unit. Data was missing for only 8 cases. Figure 1 below shows the referral status for all cases seen by the Mental Health Unit.

FIGURE 1: MENTAL HEALTH REFERRAL STATUS (N=1884)



In-depth mental health data was collected for the inmates who were referred to the Mental Health Unit during their current incarceration. Of these 579 inmates, 378 (65%) had cases opened. The remaining 201 did not have cases opened for a variety of reasons as listed in Table 1 below.

TABLE 1: OUTCOMES FOR INMATES REFERRED TO MH UNIT DURING CURRENT INCARCERATION

Referral Outcomes	Number	% of all Referred	% of all Inmates
Case Opened	378	65%	20%
No Case Opened Reasons-			
No Mental Health Issues	40	7%	2%
Substance Abuse Only	33	6%	2%
Seen for DWI Facility Clearance	7	1%	<1%
Seen for Funeral Clearance	3	1%	<1%
Seen for Work Clearance	4	1%	<1%
Transferred before Screening	2	<1%	<1%
Released before Screening	4	1%	<1%
Drug Seeking	7	1%	<1%
Refused Services	5	1%	<1%
Unable to Determine	96	17%	5%
Total	579	100%	31%

MENTAL HEALTH DIAGNOSIS

Licensed mental health practitioners used DSM-IV™ criteria (American Psychiatric Association, 1994) to diagnose the 378 inmates who had mental health cases opened. Nearly half (46%) of all inmates who had mental health cases opened were diagnosed with *Depressive Disorder - Not Otherwise Specified (NOS)*. Over half (59%) of inmates with cases opened in the Mental Health Unit were diagnosed with a *mood disorder*. See Table 2 for a summary of inmate diagnoses.

TABLE 2: DSM-IV DIAGNOSES OF INMATES WHO HAD CASES OPENED IN THE MENTAL HEALTH UNIT.

Diagnosis	Number	% of all Open Cases	% of all Inmates
Total Mood Disorders	223	59%	12%
Depressive Dis. NOS	174	46%	9%
Bipolar Disorder	19	5%	1%
Rule Out Bipolar Disorder	2	1%	<1%
Post Partum Depression	1	<1%	<1%
Mood Disorder NOS	27	7%	1%
Total Anxiety Disorders	20	5%	1%
Anxiety Disorder NOS	17	5%	1%
Generalized Anxiety Disorder	3	1%	<1%
Total Psychotic Disorders	29	8%	2%
Schizophrenia	8	2%	<1%
Rule Out Schizophrenia	1	<1%	<1%
Schizoaffective Disorder	3	1%	<1%
Psychotic Disorder NOS	17	5%	1%
Adjustment Disorders	100	26%	5%
Without Anxiety	78	21%	4%
With Anxiety	22	6%	1%
Substance-Related Only	5	1%	<1%
ADHD	1	<1%	<1%
Total	378	100%	20%

MENTAL HEALTH SERVICES RECEIVED

Most of the inmates with cases opened by the Mental Health Unit received medication management only (60%). An additional 15% of inmates with cases opened by the Mental Health Unit received both medication and counseling; thus, 75% of inmates receiving mental health services (and 15% of all inmates) were taking medication for a mental health issue. Nearly one-quarter of inmates (20%) with open cases were on suicide watch for some period of time during their current incarceration and four were sent to a psychiatric hospital.

CO-OCCURRING DISORDERS

Approximately three-quarters (78%) of the inmates with cases opened by the Mental Health Unit had co-occurring substance-related diagnoses. The most prevalent substance related diagnosis was *Poly-Substance Abuse*.

Just over half (55%) of the inmates receiving treatment from the Mental Health Unit had at least one medical condition (e.g. asthma, hepatitis, hypertension, seizure disorder, chronic pain, etc). The percentage of substance related diagnoses for the total jail population was not available for the sample, although recent research (CASA, 2010) estimates the number of persons in jails and prisons with a diagnosed substance use disorder to be about 65%.

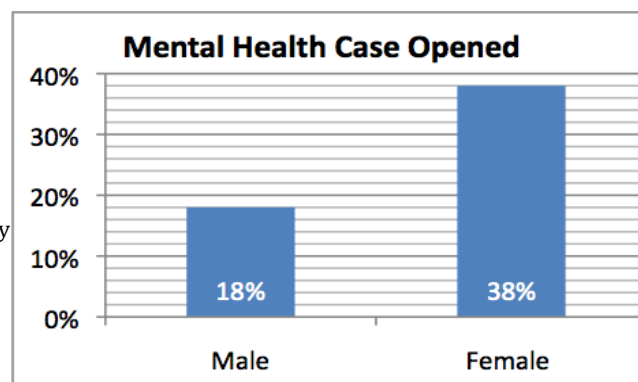
RELATIONSHIPS BETWEEN MENTAL HEALTH REFERRAL STATUS AND INMATE CHARACTERISTICS

All inmates who were under the authority of the Suffolk County Jails on October 25, 2007 were grouped into one of three mental health referral status categories: (1) never referred to the Mental Health Unit, (2) referred, but did not have a mental health case opened, and (3) referred, and had a mental health case opened. Inmates in each of the three mental health referral status categories were compared on several primary characteristics, including socio-demographic and criminal history characteristics.

SOCIO-DEMOGRAPHIC CHARACTERISTICS

Mental health referral status was significantly associated with inmate gender ($p < .001$)², race/ethnicity ($p < .001$), place of birth ($p < .001$), education level ($p < .001$), gang affiliation ($p < .001$), and age ($p < .001$). There were no statistically significant associations between mental health status and marital status, religion, and employment status. Further data on inmate socio-demographic characteristics for each mental health referral status can be found in Table 3 of the Appendix. Further data on inmate criminal history characteristics for each mental health diagnostic category can be found in Table 7 of the Appendix.

GENDER: Although the majority of inmates with open cases in the Mental

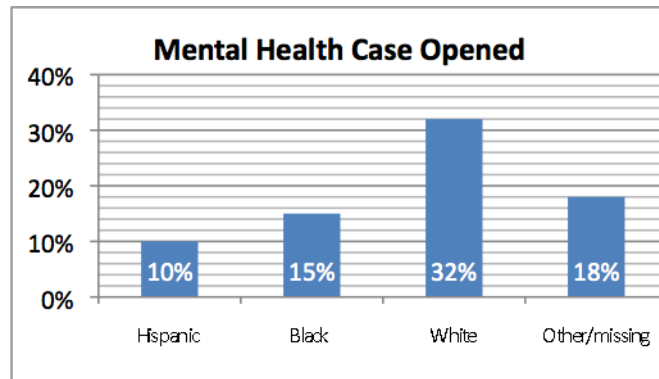


² The p-value is the probability of obtaining the result by

Health Unit were male (82%), female inmates (who represented only 10% of the total jail population) were more likely than male inmates to have cases opened. Thus, 38% of the 181 female inmates in the Suffolk County Jails on October 25, 2007 had cases opened by the Mental Health Unit as compared to 18% of the 1695 males.

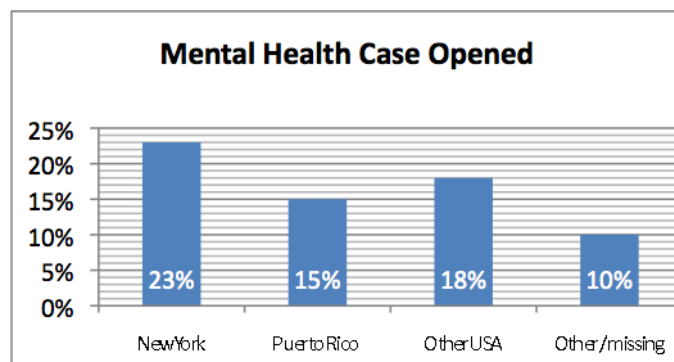
RACE/ETHNICITY: White/non-Hispanic inmates were most likely to have cases opened while Hispanic inmates were least likely to have cases opened. Although a little more than one-third (35%) of the inmates in the Suffolk County Jails on October 25, 2007 described themselves as white/non-Hispanic, this sub-group represented

more than half (56%) of the inmates who had open mental health cases on that date. More specifically, 32% of the 660 white/non-Hispanic inmates in the Suffolk County Jails on October 25, 2007 had cases opened as compared to 15% of the 730 black/non-Hispanic inmates, 10% of the 399 Hispanic inmates, and 18% of the 87 inmates with “other or unknown” race/ethnicity.

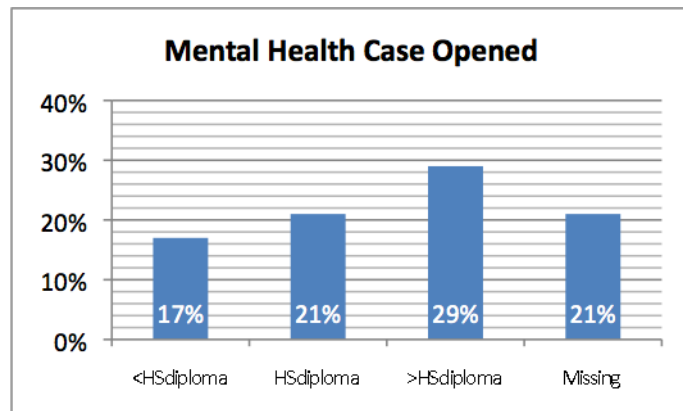


PLACE OF BIRTH: Most inmates in the Suffolk County Jails on October 25, 2007 were born in New York State (72%), as were the majority of inmates who had cases opened by the Mental Health Unit (82%). Those born in Puerto Rico or countries other than the United States were less likely to

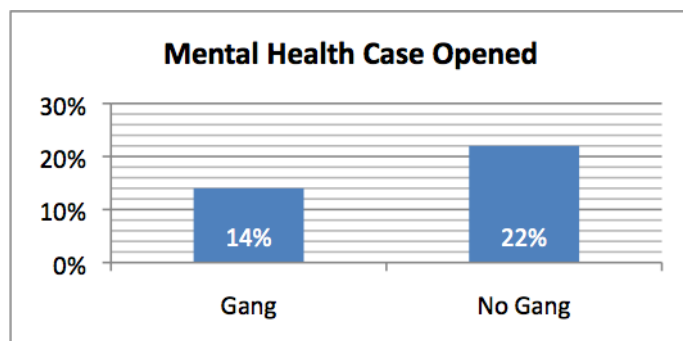
have cases opened than those born in New York or other states. More specifically, 23% of the 1348 inmates in the Suffolk County Jails on October 25, 2007 who were born in NY had cases opened by the Mental Health Unit, as compared to 15% of the 46 inmates born in Puerto Rico, 18% of the 168 inmates born elsewhere in the USA, and 10% of the 314 inmates born elsewhere in the world.



EDUCATION LEVEL: Most inmates in the Suffolk County Jails on October 25, 2007 had at least a high school diploma (54%), as did the inmates who had cases opened by the Mental Health Unit (61%). Those inmates having less education were less likely to have mental health cases opened. Thus, 17% of the 809 inmates with less than 12 years of education had cases opened by the Mental Health Unit, as compared to 21% of the 774 inmates with a high school diploma, 29% of the 237 inmates with more than a high school diploma, and 21% of the 56 inmates with no information on education level.



GANG AFFILIATION: Most inmates in the Suffolk County Jails on October 25, 2007 had no known gang affiliation (81%), and this was also true of those with open mental health cases (87%). Inmates with known gang affiliations were significantly less likely to have open mental health cases. Of the 354 known gang affiliates in the Suffolk County Jails on October 25, 2007, 14% had cases opened by the Mental Health Unit, while 22% of the 1522 non-gang affiliates had cases opened by the Mental Health Unit.

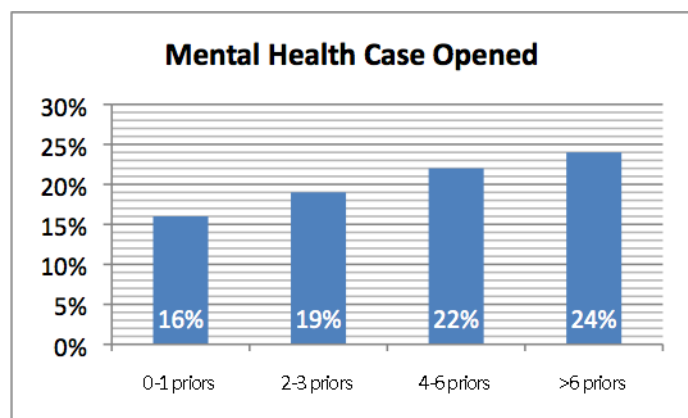


AGE: The mean age of the 1214 inmates in the Suffolk County Jails on October 25, 2007 who were never referred to the Mental Health Unit was 32 years old. The mean age for the 284 inmates who were referred to the Mental Health Unit, but did not have their cases opened was 33 years old, and the mean age for the 378 inmates with open mental health cases was 35 years old.

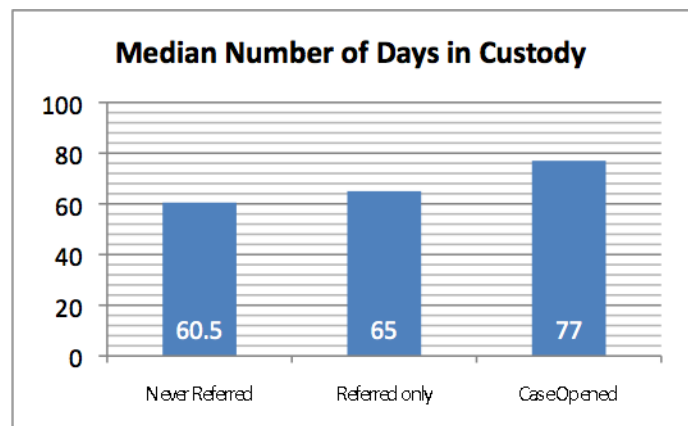
CRIMINAL HISTORY CHARACTERISTICS

Mental health referral status was significantly associated with the number of prior incarcerations ($p < .001$) and the median number of days in custody ($p < .01$). It is interesting to note that mental health referral status was not significantly associated with inmate status (e.g. pre-trial or sentenced), primary offense category, court of authority (e.g. county or district court), or bail status. Further data on inmate criminal history characteristics for each mental health referral status can be found in Table 4 of the Appendix.

NUMBER OF PRIOR INCARCERATIONS: Inmates seen by the Mental Health Unit have a greater number of prior incarcerations than those in the general jail population. Inmates in the general jail population had a median number of prior incarcerations between two and three, while the median number of incarcerations for those who had open cases in the Mental Health Unit was between four and six. Inmates who had more prior incarcerations were significantly more likely to have referrals to the Mental Health Unit. Of the 573 inmates in the Suffolk County Correctional Facilities who had more than 6 prior incarcerations, 24% had cases opened by the Mental Health Unit. This can be compared to 16% of the 503 inmates with 0-1 priors, 19% of the 453 inmates with 2-3 priors, and 22% of the 293 inmates with 4-6 priors.



DAYS IN CUSTODY: Inmates with more days in custody were significantly more likely to have cases opened by the Mental Health Unit. Of the 1,214 inmates in the Suffolk County Jails who were never referred to the Mental Health Unit, the median time in custody was 60.5 days. The median time for the 284 inmates referred to the Mental Health Unit, but did not have their cases opened, was 65 days' and the median time for the 378 inmates with open cases was 77 days.

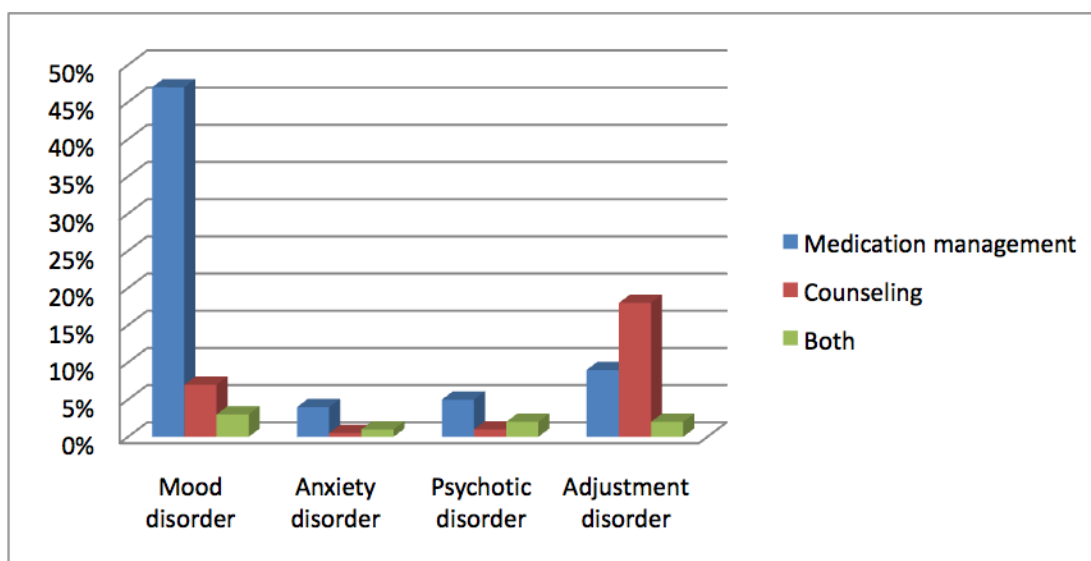


RELATIONSHIPS BETWEEN MENTAL HEALTH DIAGNOSIS AND INMATE CHARACTERISTICS

MENTAL HEALTH TREATMENT

Inmates diagnosed with *Adjustment Disorder* were most likely to receive counseling as treatment, while those diagnosed with *mood*, *anxiety* or *psychotic* disorders were more likely to receive medication management (See Figure 1 below). 279 (74%) of the 378 inmates with open cases in the Mental Health Unit were on some psychotropic medication while in custody.

FIGURE 2: TYPE OF DIAGNOSIS AND TREATMENT RECEIVED



CO-OCCURRING DISORDER

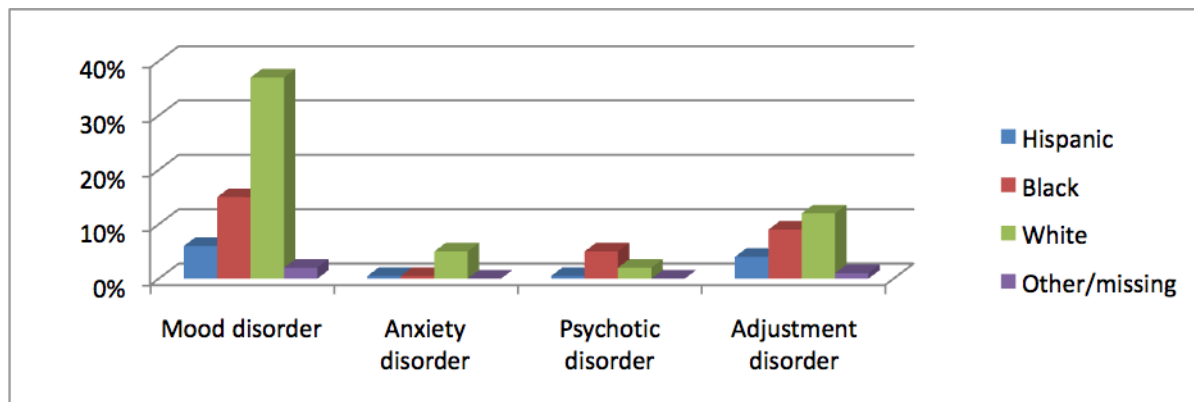
As noted earlier in this report, one of the limitations for this study was that substance use disorder diagnoses were not available for the general inmate population in the data. Given that the National Center on Addiction and Substance Abuse at Columbia University (CASA) estimates the number of persons in jails and prisons with a diagnosed substance abuse problem to be about 65%, we would hypothesize that a majority of the inmates with mental health diagnoses also have co-occurring substance abuse diagnoses. The Mental Health Unit identified 279 inmates (almost 90% of the 378 with open cases) with a co-occurring substance-related diagnosis. Inmates with mood and psychotic disorders were likely to have *Poly-Substance Abuse* diagnoses; inmates with anxiety disorders were likely to have alcohol and opioid dependence; and inmates with *Adjustment Disorder* were likely to have cannabis abuse.

Inmates diagnosed with psychotic disorders were likely to be on suicide watch for one week or more, and those with adjustment disorders were likely to be on short term suicide watch. See Table 5 of the Appendix for more details on these measures.

SOCIO-DEMOGRAPHIC AND CRIMINAL HISTORY CHARACTERISTICS

Although only 30% of the inmates with cases opened by the Mental Health Unit were black/non-Hispanic, 69% of the inmates diagnosed with a psychosis were black/non-Hispanic. Inmates with open cases who were white/non-Hispanic were more likely to have diagnoses of anxiety disorders. See Table 6 of the Appendix for all data relating major diagnostic categories and all socio-demographic characteristics.

FIGURE 3: RACE/ETHNICITY AND MENTAL HEALTH DIAGNOSIS



DISCUSSION

These findings support the best practices consensus that screening and assessment for mental health disorders in jails is essential. The findings in this report showed that one in five inmates had mental health issues serious enough to have their cases opened by the Mental Health Unit, and that 15% of all inmates were on some type of psychotropic medication during their current incarceration. This is close to the findings of Steadman, Osher, Robbins, Case & Samuels (2009) that 16.6% of 822 inmates met past-month criteria of *Schizophrenia*, *Schizophrenia Spectrum Disorder*, *Schizoaffective Disorder*, *Bipolar Disorder*, *Brief Psychotic Disorder*, *Delusional Disorder*, and *Psychotic Disorder (NOS)*. Inmates in this study were diagnosed with mood disorders (39%), adjustment disorders (26%), and psychotic disorders (8%).

In addition, white/non-Hispanic inmates were likely to have cases opened by the mental health clinic and Hispanic inmates were less likely to have cases opened. Although only 30% of the inmates with cases opened by the Mental Health Unit were black/non-Hispanic, 69% of the inmates diagnosed with psychosis were black/non-Hispanic. This is an area that should be studied further to look at factors that may help explain these results.

Inmates diagnosed with *Adjustment Disorder* received counseling alone as treatment (63%), while 17% of those inmates diagnosed with mood disorders and 22% of those diagnosed with psychotic disorders received both medication management and counseling as treatment. Research has shown that increased use of both pharmacotherapy and psychotherapy has resulted in improved clinical outcomes compared to one form of treatment alone (Olfson et al., 2002; Scott, Palmer, & Paykel, 2003). The Mental Health Unit is primarily crisis-oriented and inmates must be willing to participate in treatment. These can be potential barriers to treatment for inmates and should be looked at in subsequent research along with any other factors associated with accessing and providing treatment.

Since more than three-quarters of inmates with cases opened by the Mental Health Unit had co-occurring substance related diagnoses, mental health professionals need to be

prepared to screen, assess, and treat co-occurring substance abuse disorders in correctional facilities (Drake, Mueser, Clark, & Wallach, 1996).

Although men represented the large majority of inmates in both the Jail and the Mental Health Unit, women in the Jail were more likely to seek mental health services. This is similar to Steadman, et al.'s (2009) finding that the rate of mental illness among incarcerated women was higher than that for men. Nevertheless, 18% of the inmates who had open cases were female, and it is well accepted that women respond better to treatment that is separate and different than the standard treatment for men (Covington & Bloom, 2007). Similarly, although most of the inmates receiving treatment from the Mental Health Unit were above the age of 34, a substantial percentage (22%) was under the age of 25. Current research also indicates that young adults require treatment that is specific to their needs (Hawkins, 2009). Factors associated with men seeking, or not seeking, treatment should also be looked at in subsequent research.

Inmates in this study with opened cases in the Mental Health Unit had significantly more previous incarcerations than those without open cases. By integrating discharge planning, community mental health providers and jails may ensure a continuum of care that facilitates treatment engagement, limits repeated incarcerations, and improves well-being (Kubiak, Zeoli, Essenmacher & Hanna, 2011).

Inmates with diagnosed mental illness spend more time in custody during each incarceration. This is consistent with other studies indicating that once arrested, individuals with mental illness and substance abuse disorders spend on average 17 more days in jail than people without these disorders who were charged with similar crimes (McNiel, Binder & Robinson, 2005). At Riker's Island, New York City's largest jail, inmates with serious mental illness serve on average almost 6 months more than inmates without serious mental illness (Butterfield, 1998). These inmates represent a "captive audience" for which proper preparation for a life outside of jail could save taxpayers and communities large sums in costs of future incarcerations (Osher, Steadman & Barr, 2009).

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APPENDIX

TABLE 3 RELATIONSHIPS BETWEEN INMATE INTAKE CHARACTERISTICS AND REFERRAL STATUS TO THE MENTAL HEALTH CLINIC OF THE SUFFOLK COUNTY JAIL³

Socio-Demographic Characteristic	Total Inmates	Never referred	Referred, case not opened	Referred, case opened
Gender***				
Number (%) male	1695 (90%)	1141 (94%)	245 (86%)	309 (82%)
Number (%) female	181 (10%)	73 (6%)	39 (14%)	69 (18%)
Race/Ethnicity***				
Number (%) Hispanic	399 (21%)	310 (26%)	50 (18%)	39 (10%)
Number (%) Black/non-Hispanic	730 (39%)	508 (42%)	109 (38%)	113 (30%)
Number (%) White/non-Hispanic	660 (35%)	330 (27%)	120 (42%)	210 (56%)
Number (%) Other/Missing	87 (5%)	66 (5%)	5 (2%)	16 (4%)
Place of Birth***				
Number (%) New York	1348 (72%)	814 (67%)	224 (79%)	310 (82%)
Number (%) Puerto Rico	46 (3%)	33 (3%)	6 (2%)	7 (2%)
Number (%) other USA	168 (9%)	105 (9%)	32 (11%)	31 (8%)
Number (%) El Salvador	84 (5%)	76 (6%)	5 (2%)	3 (1%)
Number (%) Honduras	35 (2%)	30 (3%)	2 (1%)	3 (1%)
Number (%) Guatemala	25 (1%)	23 (2%)	2 (1%)	0 (0%)
Number (%) Mexico	22 (1%)	18 (2%)	2 (1%)	2 (1%)
Number (%) Other Country	95 (5%)	76 (6%)	8 (3%)	11 (3%)
Number (%) Other/Missing	53 (3%)	39 (3%)	3 (1%)	11 (3%)
Age at current intake***				
Mean age in years	32.7	31.8	33.3	35.1
Marital Status				
Number (%) Single	1342 (74%)	884 (75%)	206 (73%)	252 (69%)
Number (%) Married	335 (18%)	215 (18%)	48 (17%)	72 (20%)
Number (%) Divorced	114 (6%)	60 (5%)	22 (8%)	32 (9%)
Number (%) Other/Missing	32 (2%)	16 (1%)	5 (2%)	11 (3%)
Religion				
Number (%) Catholic	995 (55%)	634 (54%)	148 (53%)	213 (58%)
Number (%) Baptist	275 (15%)	187 (16%)	39 (14%)	49 (13%)
Number (%) Jewish	33 (2%)	20 (2%)	3 (1%)	10 (3%)
Number (%) Muslim	80 (4%)	48 (4%)	20 (7%)	12 (3%)
Number (%) non-religious	305 (17%)	201 (17%)	48 (17%)	56 (15%)
Number (%) Other/Missing	135 (7%)	85 (7%)	23 (8%)	27 (7%)

³ Percentages add up to 100% (±1 due to rounding) going down the columns. They represent the percentage of individuals within that category with each socio-demographic characteristic.

*Inmates Referred for Mental Health Services at the Suffolk County Correctional Facilities
-A One Day Snapshot-*

Socio-Demographic Characteristic	Total Inmates	Never referred	Referred, case not opened	Referred, case opened
Education Level***				
Number (%) < HS diploma	809 (43%)	561 (46%)	114 (40%)	134 (35%)
Number (%) HS graduate	774 (41%)	495 (41%)	116 (41%)	163 (43%)
Number (%) > HS graduate	237 (13%)	117 (10%)	51 (18%)	69 (18%)
Number (%) Missing	56 (3%)	41 (3%)	3 (1%)	12 (3%)
Employment Status				
Number (%) Full-time	819 (44%)	528 (44%)	119 (42%)	172 (46%)
Number (%) Part-time	130 (7%)	83 (7%)	25 (9%)	22 (6%)
Number (%) Unemployed	761(41%)	482 (40%)	122 (43%)	157 (42%)
Number (%) Not working/other	111 (6%)	78 (6%)	12 (4%)	21 (6%)
Number (%) Other/Missing	55 (3%)	43 (4%)	6 (2%)	6 (2%)
Gang affiliation***				
Number (%) Yes	354 (19%)	257 (21%)	47 (17%)	50 (13%)
Number (%) No	1522 (81%)	957 (79%)	237 (84%)	328 (87%)

**p<.01

***p<.001

**Table 4 RELATIONSHIPS BETWEEN CRIMINAL HISTORY CHARACTERISTICS AND REFERRAL STATUS
TO THE MENTAL HEALTH CLINIC⁴**

Criminal History Characteristic	Total Inmates	Never referred	Referred, case not opened	Referred, case opened
Inmate Status				
Sentenced/County time	584 (31%)	373 (31%)	88 (31%)	123 (33%)
Pre-trial Family & Misdemeanor	256 (14%)	169 (14%)	36 (13%)	51 (14%)
Pre-trial Felony	842(45%)	549 (45%)	131 (46%)	162 (43%)
NYS Parole Violator	78 (4%)	50 (4%)	14 (5%)	14 (4%)
Other/Missing	116 (6%)	73 (6%)	15 (5%)	28 (7%)
Primary Offense Category				
Number (%) Violent	406 (22%)	269 (22%)	55 (19%)	82 (22%)
Number (%) Drug	425 (23%)	297 (25%)	58 (20%)	70 (19%)
Number (%) DWI/Alcohol	215 (12%)	136 (11%)	35 (12%)	44 (12%)
Number (%) Property	270 (14%)	153 (13%)	53 (19%)	64 (17%)
Number (%) Sex Offenses	27 (1%)	17 (1%)	2 (1%)	8 (2%)
Number (%) Assaults	173 (9%)	98 (8%)	32 (11%)	43 (11%)
Number (%) Violations	151 (8%)	101 (8%)	20 (7%)	30 (8%)
Number (%) Vehicle/Traffic	154 (8%)	43 (4%)	9 (3%)	3 (1%)
Number (%) Other	33 (2%)	100 (8%)	20 (7%)	34 (9%)
Court of Authority				
Number (%) County Court	437 (23%)	283 (23%)	72 (25%)	82 (22%)
Number (%) District Court	1137 (61%)	717 (59%)	176 (62%)	244 (65%)
Number (%) Town/Village	162 (9%)	114 (9%)	21 (7%)	27 (7%)
Number (%) Other/Missing	140 (8%)	100 (8%)	15 (5%)	25 (7%)
Prior Incarcerations***				
Number (%) 0-1 Priors	503 (28%)	364 (31%)	61 (22%)	78 (21%)
Number (%) 2-3 Priors	453 (25%)	309 (26%)	59 (21%)	85 (23%)
Number (%) 4-6 Priors	293 (16%)	181 (15%)	49 (17%)	63 (17%)
Number (%) >6 Priors	573 (31%)	321 (28%)	112 (40%)	140 (38%)
Prior Incarcerations***				
Mean number	6.6	5.9	7.5	8.1
Days in Custody (current stay)**				
Median number of days	63.5	60.5	65.0	77.0
Received Bail				
Number (%) Yes	903 (49%)	602 (51%)	137 (50%)	164 (45%)
Number (%) No	929 (51%)	585 (49%)	140 (51%)	204 (55%)
Amount of Bail				
Number (%) 25-1,000	83 (4%)	56 (5%)	14 (5%)	13 (3%)
Number (%) 1,001-5,000	144 (8%)	98 (8%)	14 (5%)	32 (9%)
Number (%) 5,001-10,000	109 (6%)	76 (6%)	16 (6%)	17 (5%)
Number (%) 10,001-25,000	171 (9%)	116 (10%)	23 (8%)	32 (9%)
Number (%) 25,001-50,000	138 (7%)	94 (8%)	27 (10%)	17 (5%)
Number (%) 50,001-10,000	123 (7%)	80 (7%)	20 (7%)	23 (6%)
Number (%) 100.001 or more	134 (7%)	82 (7%)	23 (8%)	30 (8%)
Number (%) No Bail/unknown \$	974 (52%)	612 (51%)	148 (52%)	214 (57%)

⁴ Percentages add up to 100% (±1 due to rounding) going down the columns. They represent the percentage of individuals within that category with each socio-demographic characteristic.

TABLE 5 RELATIONSHIPS BETWEEN MAJOR DIAGNOSTIC CATEGORIES AND OTHER MENTAL HEALTH AND TREATMENT CHARACTERISTICS⁵

Health/Treatment Characteristic	Mood Disorder	Anxiety Disorder	Psychotic Disorder	Adjustment Disorder	Total
Type of treatment rec'd***					
Medication management	161 (73%)	14 (70%)	18 (67%)	30 (30%)	223 (60%)
Counseling	23 (10%)	2 (10%)	3 (11%)	63 (63%)	91 (25%)
Both	38 (17%)	4 (20%)	6 (22%)	7 (7%)	55 (15%)
Substance Related Diag***					
Polysubstance Abuse	123 (55%)	5 (25%)	15 (52%)	29 (29%)	172 (46%)
Alcohol Dependence	28 (13%)	5 (25%)	3 (10%)	17 (17%)	53 (14%)
Cocaine Depend/Abuse	20 (9%)	1 (5%)	1 (3%)	6 (6%)	28 (8%)
Opioid Dependence	12 (5%)	2 (10%)	0 (0%)	3 (3%)	17 (5%)
Cannabis Abuse	5 (2%)	0 (0%)	1 (3%)	10 (10%)	16 (4%)
Other/None	35 (15%)	7 (35%)	9 (31%)	35 (35%)	86 (23%)
Suicide Watch (# of days)***6					
None	189 (85%)	19 (95%)	21 (72%)	70 (71%)	299 (81%)
< 1 week	21 (10%)	1 (5%)	2 (7%)	26 (26%)	50 (14%)
1 week or more	12 (5%)	0 (0%)	6 (21%)	3 (3%)	21 (6%)
Psych Hospitalization***					
Yes	220 (99%)	20 (100%)	26 (90%)	99 (100%)	365 (99%)
No	1 (1%)	0 (0%)	3 (10%)	0 (0%)	4 (1%)
Number/ Medical Conditions					
None	94 (42%)	8 (40%)	19 (66%)	45 (45%)	166 (45%)
1	79 (35%)	8 (40%)	6 (21%)	37 (37%)	130 (35%)
2 or 3	50 (22%)	4 (20%)	4 (14%)	18 (18%)	76 (20%)
Type of Medical Condition⁷					
Asthma	45 (20%)	4 (20%)	3 (10%)	20 (20%)	72 (19%)
Chronic Pain	30 (14%)	1 (5%)	0 (0%)	9 (9%)	40 (11%)
Hepatitis	27 (12%)	1 (5%)	2 (7%)	7 (7%)	37 (10%)
Hypertension	28 (13%)	1 (5%)	5 (17%)	9 (9%)	43 (11%)
Seizure Disorder	19 (9%)	4 (20%)	2 (7%)	8 (8%)	33 (9%)

⁵ Percentages add up to 100% (± 1 due to rounding) going down the columns. They represent the percentage of individuals within that category with each socio-demographic characteristic.

⁶ Although statistically significant, X^2 may not be valid because multiple cells have expected count less than 5.

⁷ Percentages are not meant to add up to 100% in columns or rows. Each percentage individually represents the proportion of inmates within the psychiatric disorder category who were co-morbid with the listed medical condition. Some inmates had more than one medical condition, and some had none.

Table 6 RELATIONSHIPS BETWEEN MAJOR DIAGNOSTIC CATEGORIES AND SOCIO-DEMOGRAPHIC CHARACTERISTICS⁸

Socio-Demographic Characteristic	Mood Disorder	Anxiety Disorder	Psychotic Disorder	Adjustment Disorder	Total
Gender					
Number (%) male	177 (79%)	16 (80%)	24 (83%)	86 (86%)	303 (81%)
Number (%) female	46 (21%)	4 (20%)	5 (17%)	14 (14%)	69 (19%)
Race/Ethnicity***					
Number (%) Hispanic	22 (10%)	1 (5%)	1 (3%)	16 (16%)	40 (11%)
Number (%) Black/non-Hispanic	55 (25%)	2 (10%)	20 (69%)	33 (33%)	110 (30%)
Number (%) White/non-Hispanic	139 (62%)	17 (85%)	8 (28%)	46 (46%)	210 (57%)
Number (%) Other/Missing	7 (3%)	0 (0%)	0 (0%)	5 (5%)	12 (3%)
Place of Birth					
Number (%) New York	183 (82%)	18 (90%)	27 (93%)	77 (77%)	305 (82%)
Number (%) Puerto Rico	4 (2%)	0 (0%)	0 (0%)	3 (3%)	7 (2%)
Number (%) other USA	21 (9%)	2 (10%)	1 (3%)	7 (7%)	31 (8%)
Number (%) Other Country	9 (4%)	0 (0%)	1 (3%)	9 (9%)	19 (5%)
Number (%) Other/Missing	6 (3%)	0 (0%)	0 (0%)	4 (4%)	10 (3%)
Age at current intake					
Mean age in years	35.8	33.9	37.8	33.3	35.2
Marital Status					
Number (%) Single	141 (65%)	14 (70%)	24 (83%)	68 (71%)	247 (68%)
Number (%) Married	46 (21%)	4 (20%)	4 (14%)	19 (19%)	72 (20%)
Number (%) Divorced	21 (10%)	2 (10%)	0 (0%)	9 (9%)	32 (9%)
Number (%) Other/Missing	9 (4%)	0 (0%)	1 (3%)	1 (1%)	11 (3%)
Religion					
Number (%) Catholic	129 (59%)	13 (65%)	11 (38%)	58 (60%)	211 (58%)
Number (%) Baptist	29 (13%)	1 (5%)	5 (17%)	14 (15%)	49 (14%)
Number (%) Jewish	5 (2%)	0 (0%)	1 (3%)	4 (4%)	10 (3%)
Number (%) Muslim	6 (3%)	0 (0%)	3 (10%)	2 (2%)	11 (3%)
Number (%) non-religious	34 (16%)	4 (20%)	5 (17%)	11 (12%)	54 (15%)
Number (%) Other/Missing	14 (7%)	2 (10%)	4 (14%)	7 (7%)	27 (8%)
Education Level***					
Number (%) < HS diploma	65 (29%)	7 (35%)	16 (55%)	43 (43%)	131 (35%)
Number (%) HS graduate	106 (48%)	8 (40%)	6 (21%)	41 (41%)	161 (43%)
Number (%) > HS graduate	45 (20%)	5 (25%)	7 (24%)	12 (12%)	69 (19%)
Number (%) Missing	7 (3%)	0 (0%)	0 (0%)	4 (4%)	11 (3%)
Employment Status					
Number (%) Full-time	106 (48%)	8 (40%)	21 (72%)	34 (34%)	169 (45%)
Number (%) Part-time	16 (7%)	1 (5%)	0 (0%)	4 (4%)	21 (6%)
Number (%) Unemployed	85 (38%)	9 (45%)	8 (28%)	53 (53%)	155 (42%)
Number (%) Not working/other	12 (5%)	1 (5%)	0 (0%)	8 (8%)	21 (6%)
Number (%) Other/Missing	4 (2%)	1 (5%)	0 (0%)	1 (1%)	6 (2%)
Gang affiliation					
Number (%) Yes	22 (10%)	2 (10%)	5 (17%)	19 (19%)	48 (13%)
Number (%) No	201 (90%)	18 (90%)	24 (83%)	81 (81%)	324 (87%)

⁸ Percentages add up to 100% (±1 due to rounding) going down the columns. They represent the percentage of individuals within that category with each socio-demographic characteristic.

TABLE 7 RELATIONSHIPS BETWEEN MAJOR DIAGNOSTIC CATEGORIES AND CRIMINAL HISTORY CHARACTERISTICS⁹

Criminal History Characteristic	Mood Disorder	Anxiety Disorder	Psychotic Disorder	Adjustment Disorder	Total
Inmate Status					
Sentenced/County time	74 (33%)	10 (50%)	11 (38%)	25 (25%)	120 (32%)
Pre-trial Family & Misd	34 (15%)	1 (5%)	2 (7%)	14 (14%)	51 (14%)
Pre-trial Felony	89 (40%)	8 (40%)	13 (45%)	51 (51%)	161 (43%)
NYS Parole Violator	10(5%)	0 (0%)	2 (7%)	1 (1%)	13 (4%)
Other/Missing	16 (7%)	1 (5%)	1 (3%)	9 (9%)	27 (7%)
Primary Offense Category					
Number (%) Violent	40 (18%)	4 (20%)	10 (35%)	27 (27%)	81 (22%)
Number (%) Drug	42 (19%)	2 (10%)	5 (17%)	20 (20%)	69 (19%)
Number (%) DWI/Alcohol	23 (10%)	7 (35%)	1 (3%)	13 (13%)	44 (12%)
Number (%) Property	42 (19%)	4 (20%)	3 (10%)	15 (15%)	64 (17%)
Number (%) Sex Offenses	6 (3%)	0 (0%)	0 (0%)	2 (2%)	8 (2%)
Number (%) Assaults	26 (12%)	3 (15%)	3 (10%)	10 (10%)	42 (11%)
Number (%) Violations	18 (8%)	0 (0%)	4 (14%)	7 (7%)	29 (8%)
Number (%) Vehicle/Traffic	2 (1%)	0 (0%)	0 (0%)	1 (1%)	3 (1%)
Number (%) Other	24 (11%)	0 (0%)	3 (10%)	5 (5%)	32 (9%)
Court of Authority					
Number (%) County Court	48 (22%)	4 (20%)	7 (24%)	20 (20%)	79 (21%)
Number (%) District Court	142 (64%)	15 (75%)	18 (62%)	68 (68%)	243 (65%)
Number (%) Town/Village	17 (8%)	1 (5%)	2 (7%)	6 (6%)	26 (7%)
Number (%) Other/Missing	16 (7%)	0 (0%)	2 (7%)	6 (6%)	24 (7%)
Prior Incarcerations					
Number (%) 0-1 Priors	43 (20%)	5 (25%)	7 (24%)	23 (24%)	78 (22%)
Number (%) 2-3 Priors	48 (22%)	7 (35%)	4 (14%)	25 (26%)	84 (23%)
Number (%) 4-6 Priors	44 (20%)	1 (5%)	5 (17%)	12 (13%)	62 (17%)
Number (%) >6 Priors	81 (38%)	7 (35%)	13 (45%)	36 (38%)	137 (38%)
Prior Incarcerations					
Mean number	8.2	7.2	9.3	7.6	8.1
Days in Custody (current stay)					
Mean number of days					
Received Bail					
Number (%) Yes	94 (43%)	6 (32%)	8 (28%)	55 (56%)	163 (45%)
Number (%) No	123 (57%)	13 (68%)	21 (72%)	43 (44%)	200 (55%)
Amount of Bail					
Number (%) 25-1,000	9 (4%)	0 (0%)	0 (0%)	4 (4%)	13 (4%)
Number (%) 1,001-5,000	22 (10%)	0 (0%)	3 (10%)	7 (7%)	32 (9%)
Number (%) 5,001-10,000	10 (5%)	1 (5%)	1 (3%)	5 (5%)	17 (5%)
Number (%) 10,001-25,000	24 (11%)	1 (5%)	0 (0%)	7 (7%)	32 (9%)
Number (%) 25,001-50,000	6 (3%)	2 (10%)	2 (7%)	7 (7%)	17 (5%)
Number (%) 50,001-10,000	9 (4%)	1 (5%)	0 (0%)	12 (12%)	22 (6%)
Number (%) 100,001 or more	14 (6%)	1 (5%)	2 (7%)	13 (13%)	30 (8%)
Number (%) No Bail/unknown	129 (58%)	14 (70%)	21 (72%)	45 (45%)	209 (56%)

⁹ Percentages add up to 100% (±1 due to rounding) going down the columns. They represent the percentage of individuals within that category with each socio-demographic characteristic.